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COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	TION: <u>San J</u> R: <u>PØ 704</u>	15c Home C	learing and Maintenance
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
-	Jackson	Address V. Le FL City/ State and Zip Code	th, Unit 205 32257
For further information o	concerning this matter, pleas	se call:	
Micha Name of	Contact Person	at (<u>904</u> Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy. (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mailir</u>	ig Address	Street	<u>Address</u>

Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation

San Jose Home	Cleaning and	Maintenance, Inc
D 15	as currently filed with the Florida	
	0072340	_,
(Documen	t Number of Corporation (if known	1
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	atutes, this <i>Floridu Profit Corporat</i>	ion adopts the following amendment(s) to
A. If amending name, enter the new name of the corp		
FPM Communities.	Inc.	The new
name must be distinguishable and contain the word "corpo" lnc.," or Co.," or the designation "Corp." "Inc," o "chartered," "professional association," or the abbrevia	т Со . я ргојезмони согрони	nted" or the abbreviation "Corp.," ion name must contain the word
B. Enter new principal office address, if applicable:	NIA	
(Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)	202
		Carrier 1
		
C. Enter new mailing address, if applicable:	. 11 /	-
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	-MIII	
		. <u> </u>
D. If amending the registered agent and/or registered	office address in Florida, enter th	e name of the
new registered agent and/or the new registered offi		
Name of New Registered Agent NA		
	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
	• •	
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I are		ations of the position.
	, ,	
1 //A		
- 10 j / · Signatur	e of New Registered Agent, if chang	
	2 6 7 7 1000	.,

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name Address	
1) Change			
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			_
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		<u> </u>	

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
4 / i A
<u>NIA</u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
NIA

. . . .

The date of each amendment(s) a	doption:	, it other than the
date this document was signed.	• •	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	lock does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharehold	der action and shareholder
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amer afficient for approval.	ndment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	statement (s):
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	· · · · · · · · · · · · · · · · · · ·	
·	(voting group)	
Dated	2-31-2020	
selecte	irector, president or other officer – if directors or officers have no d, by an incorporator – if in the hands of a receiver, trustee, or of ted fiduciary by that fiduciary)	ot been her court
	(Typed or printed name of person signing)	
	(Title of person signing)	
	true or person arguings	